RECEIVED

PART A APPLICATION FOR PERMIT

FEB 272015

(excluding Household Goods)

WASH. UT. & TP. COMM

WASHINGTON UTILITIES AND TRANSPORTATION COMMISSION

1300 S Evergreen Park Dr. SW, PO Box 47250, Olympia, WA 98504-7250

Telephone (360) 664-1222 – Fax (360) 586-1181 Intrastate Common Carrier Operating Authority

P 84-10. 5122					
FOR OFFICIAL USE ONLY	Docket No. TV- \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
Reception Number Safety M					
111 0200 200 02	Employee 🔥				
\$275. TYPE OF APPLICATION					
New Common Carrier Permit Authority, Extension of Common Carrier Permit Aut					
or Transfer of Existing Permit Number					
\$275 GENERAL COMMODITIES ONLY	\$100 GENERAL COMMODITIES, including ARMORED CAR SERVICE				
\$275 GENERAL COMMODITIES, including ARMORED CAR SERVICE	\$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS				
\$275 GENERAL COMMODITIES, including HAZARDOUS MATERIALS	\$100 GENERAL COMMODITIES, including HAZARDOUS MATERIALS and ARMORED CAR SERVICE				
\$275 GENERAL COMMODITIES, INCLUDING HAZARDOUS MATERIALS and ARMORED CAR SERVICE					
\$100 REINSTATEMENT OF CANCELLED COMMON CARRIER PERMIT - Must be filed within 10 months of cancellation					
MOTOR CARRIE	R IDENTIFICATION				
Common Carrier #: 65785 Unified Business I	dentifier Number (UBI): 603-353-403				
Legal Name: GAJ Cassical LC USDOT: 2457882					
Trade Name(s), dba(s), if any 6 b J Cassics LLC					
Email address: 91 Carrier elector Yahro: 4m					
	Fax Number: 360 - 366 - 8417				
Business (Mailing) Address: 4712 Pauf	12 Hwy, Bellingham, WA-98226				
Physical Address (if different): Same as	abore				

:		· · · · · · · · · · · · · · · · · · ·	TYPE OF BUSIN	ESS STRUCTI	JRE	
☑ Individual	☐ Partne	rship	☐ Corporation	🗷 Limited Li	ability Company	State of Inc
NAME	NAME <u>TITLE</u> .			Stock Distribution or % of Shares		
	Passingles Single Member / Mana			ser.	1000	
				···		
			*TRANSFER OF F	ERMIT NUN	IBER	
*Complete th	is section ON	LY if you	are transferring an	existing pern	nit to a new owne	er. List name of current
permit holder transfer of the	and permit r	number	to be transferred. Th	ie current pe	ermit hold must si	gn below to authorize the
NAME ON PEF	PIMIT				Permi	t Number
NAME ON PER	XIVII 1					
Signature of c	urrent permit	t holder			Dat	e
			TIP ALICE BEDIEF	APAITE .		
			SURANCE REQUIRE will not be issued until			
☐ You will not haul hazardous materials in any quantity. You will only operate vehicles with a GVWR of less than 10,000 pounds. You must obtain \$300,000 in Public Liability and Property Damage		You hazard quanti vehicle 10,000 must of Public Damag	will not haul dous materials in any ty. You will operate es with a GVWR of pounds or more. You obtain \$750,000 in Liability and Property ge Insurance. You must ete Part B.	You will haul hazardous materials requiring \$1 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2.		You will haul hazardous materials requiring \$5 million in Public Liability and Property Damage Insurance. You must complete Part C, Sections 1 and 2.
Unit #			VEHICLE LIST (Attach Number	State	VIN number	
AII			2	WA		67PW77116
	<u>.,</u>					
			SIGNA		· · · · · · · · · · · · · · · · · · · ·	to authority to operate
and that no or	perations may	y be cor	e filing of this applicated until a permined in this application	t is issued by	the Commission.	te authority to operate I hereby declare and wledge and belief.
	1_	5	-L.		2/24/19	
Signature			Date			

PART B SAFETY FITNESS SURVEY

FOR ALL APPLICANTS THAT OPERATE A VEHICLE OVER 10,000 GVWR

Companies applying to transport any commodity must complete this survey.

Instructions: In each category shown below, list the person and/or position responsible for understanding, maintaining, and complying with current Federal Motor Carrier Safety Administration (FMCSA) regulations in the Code of Federal Regulations at 49 CFR. The requirement to comply with current FMCSR is mandated by the Washington State Patrol (WSP) in its rules, Washington Administrative Code (WAC) 446-65.

pioc of the EMCSR's are available from several vendors. These include, but are not limited to:

	Controlled Sub	stances and Alcohol Te	, www.gpo.gov, 866 512-1800.
lame: Parm	inder Singh	Position:	1
 ave a valid CDL. The has a gross or rating of mor has a gross v is designed to is of any size 	definition of a commercial moto ombined weight rating of 26,001 re than 10,000 pounds; or ehicle weight rating of 26,001 po o transport 16 or more passenge	or vehicle is a vehicle that pounds that includes a t ounds or more; or ers, including the driver; o	owed unit with a gross vehicle weight
	no a commorcial motor vehicle re	equiring a CDL must parti	cipate in a controlled substance and
ny person who drive Icohol testing progra 10.	am as required by FMCSA in 49 C	CFR Part 382 and 49 CFR I	Part 40, and by the WSP in WAC 446-65-

have a valid CDL, as required by the Washington State Department of Licensing. The definition of a commercial motor

- vehicle is a vehicle that: has a gross combined weight rating of 26,001 pounds that includes a towed unit with a gross vehicle weight rating of more than 10,000 pounds; or
 - has a gross vehicle weight rating of 26,001 pounds or more; or
 - is designed to transport 16 or more passengers, including the driver; or
 - is of any size and is used to transport hazardous materials of an amount that requires placarding under hazardous materials regulations.

Driver Qua	lification Requirem	ents
Name: Parminder Singh	Position:	manager / member
Each company must maintain a complete Driver Qualities required by FMCSR Part 391.51 and by the WSP in Vintrastate commerce within Washington have limited operations must maintain a complete file on themselv	VAC 446-65-010. Ow exemptions. Owners/	ner/operators that work exclusively in operators that conduct any interstate
Driver	s Hours of Service	
Name: Parminder Singh	Position:	manager / Manager
Each company must maintain true and accurate hours as required by the FMCSA in 49 CFR, Part 395.1(e) and	of service records for by the WSP in WAC 4	each individual that drives a motor vehicle 46-65-010.
Vehicle Inspection	n, Repair, and Mair	tenance
Name: <u>Paramineles</u> Singh	Position:	Manages / member
Each company must prepare a written "Driver Vehicle I the FMCSA in 49 CFR, Part 396.11 and by the WSP in W. required records for each vehicle that includes the follo WSP in WAC 446-65-010: • Identification of the vehicle.	AC 446-65-010. In add	dition, each company must maintain certain
 The nature and due date of various insp A record of inspections, repairs and man 	pection and maintena intenance indicating t	nce operations to be performed. their date and nature.
All companies must conduct periodic inspections as requivalent to the conduct periodic inspections as requivalent to the conduct periodic inspections as requivalent to the conduct periodic inspections as required to the conduct periodic inspections and the conduct periodic inspection in the conduct periodic in	uired by the FMCSA i	n 49 CFR, Part 396.17 and by the WSP in
	ignature	
My signature below certifies that I understand my riches the safety requirements which apply to my operation	esponsibility as a m ons.	notor carrier and I will comply with all
ful an		2/24/15
ignature of applicant		Date

NOTE: Once issued, you must keep a copy of your permit in your vehicle.

Form E

UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY DAMAGE LIABILITY CERTIFICATE OF INSURANCE

(Executed in Triplicate)

Filed with	WA UTILITIES & TRANSP (Name of Com		ON (hereinaft	er called Commission	
This is to cert	ify, that the OOIDA RISK RETER		Name of Company)		
(hereinafter called C	Company) of58 EAST VIEW LAN		VT 05641 Office Address of Compa	ny)	
has issued to	G&J CARRIER LLC (Name of Motor Carrier)	of	4712 PACIFIC HWY;	BELLINGHAM, W (Address of Motor Carri	
policies and continu Liability Insurance E obligations imposed	f insurance effective from <u>03-08-</u> ing until cancelled as provided here ndorsement, has or have been ame upon such motor carrier by the pr ated in accordance therewith.	ein, which, by attachmen nded to provide automobi	t of the Uniform Mote le bodily injury and pr	or Carrier Bodily Injui operty damage liabili	ry and Property Damage ty insurance covering the
Whenever rea	quested, the Company agrees to fi	ırnish the Commission a	duplicate original of	said policy or policie	es and all endorsements
cancellation may be	e and the endorsement described leffected by the Company or the instead to run from the date notice is actual	sured giving thirty (30) da	ys' notice in writing to		
Countersigned at	1 NW OOIDA DRIVE	GRAIN	VALLEY	MO	64029
	(Street Address)	(City)		(State)	(Zip Code)
	day of MARCH File No PL199520014	20 <u>15</u> .		eboiah 1	Winkley
,	(Policy Numl	oer)	(Au	esentative)	
MC 1633a (Ed. 8-99)) UNIFORM INFORMATION SERVI	CES, INC.			IRB 3539B

bz Member # 1174921